

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	JP		04/10/01
O.I.P.E. CLASSIFIER		49	5/2/01
FORMALITY REVIEW	ew	949	5/16/01
RESPONSE FORMALITY REVIEW	lit	907	9-20-01

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	11/2/01
2	✓	✓	11/2/01
3	✓	✓	11/2/01
4	✓	✓	11/2/01
5	✓	✓	11/2/01
6	✓	✓	11/2/01
7	✓	✓	11/2/01
8	✓	✓	11/2/01
9	✓	✓	11/2/01
10	✓	✓	11/2/01
11	✓	✓	11/2/01
12	✓	✓	11/2/01
13	✓	✓	11/2/01
14	✓	✓	11/2/01
15	✓	✓	11/2/01
16	✓	✓	11/2/01
17	✓	✓	11/2/01
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23	✓	✓	11/2/01
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25	✓	✓	11/2/01
26	✓	✓	11/2/01
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28	✓	✓	11/2/01
29	✓	✓	11/2/01
30	✓	✓	11/2/01
31	✓	✓	11/2/01
32	✓	✓	11/2/01
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43	✓	✓	11/2/01
44	✓	✓	11/2/01
45	✓	✓	11/2/01
46	✓	✓	11/2/01
47	✓	✓	11/2/01
48	✓	✓	11/2/01
49	✓	✓	11/2/01
50	✓	✓	11/2/01

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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10-6/7  
9-20-01